

Delaware Department of

Human Resources

Benefits Made Easy Statewide Benefits Office

Open Enrollment 2021 FAQs

May 3 - 19, 2021

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For more information, visit de.gov/statewidebenefits (select "Open Enrollment")



Q: Do I have to actively participate in Open Enrollment?

The State of Delaware is encouraging benefit-eligible employees to *Navigate Open Enrollment and actively participate* between **May 3 – 19, 2021** by completing these two simple steps:

- **STEP ONE**: Make any necessary changes to your health, dental* or vision* coverage. Contact your organization's Human Resource/Benefits Office for the forms to enroll or make coverage changes. You must enroll or make changes by May 19, 2021.
- **STEP TWO:** Complete the online <u>Spousal Coordination of Benefits Form</u> only if you will be covering your spouse under a Highmark Delaware or Aetna Health Plan as of July 1, 2021. This form must be completed each year during your Open Enrollment period to avoid a reduction of spousal benefits.

Q: Will there be benefit plan premium (rate) changes for 2021?

The benefit plan premiums (rates) for the State health and dental* plans will not change effective July 1, 2021. While there are no rate increases for the health plans as of July 1, 2021, the State Employee Benefits Committee (SEBC) continues to closely monitor healthcare expenditures in the State Group Health Insurance Plan. Should it be necessary to increase rates during the course of the plan year, individuals enrolled in a health plan will have the opportunity to make changes. Details will be communicated as they become available. Learn about these changes by visiting the SBO website (select "Open Enrollment").

*Please note that plan options may vary. Contact your HR/Benefits Office for details.

Q: When will the coverage changes take effect?

The coverage changes and rates, including enrollment or cancellation of coverage, will take effect on **July 1, 2021**. Contact your Human Resources/Benefits Office for information regarding benefit deductions.



^{*}Please note that plan options may vary. Contact your HR/Benefits Office for details.

Q: What are the resources to help me complete Open Enrollment?

There are several tools on the <u>SBO website</u> (select "Open Enrollment") to help you actively participate in Open Enrollment and be a wise healthcare consumer:

- Enrollment Action Checklist Document provides the required steps for completing Open Enrollment
- **Spousal Coordination of Benefits Form Self-Service Guide** Document provides step-by-step guidance in navigating and completing the form
- **Health/Dental/Vision Plan Comparison Charts** Three documents that provide a side-by-side comparison of the health plans, dental plans, and vision plans offered by the State of Delaware
- myBenefitsMentor® (For DTC Employees ONLY) Online consumer decision tool that is designed to help you estimate upcoming healthcare expenses and make the best enrollment selection from the four health plans offered by the State of Delaware
- And More! Access plan booklets, highlights, rates, etc.

Q: Will I get Member ID Cards?

- Health: Members who enroll or change plans/tiers will receive new ID cards.
- Prescription: CVS Caremark will send new ID cards to members enrolled in a State of Delaware health plan.
- SurgeryPlus: Only NEW members who enroll in a State of Delaware non-Medicare health plan will receive ID cards.
- **Dental:** Only **NEW** members will receive ID cards.
- Vision: Only **NEW** members that were not previously enrolled and **NEW** High Plan members will receive ID cards.
- Accident & Critical Illness (UD Employees Only): Securian Financial will issue a Certificate of Insurance to those who
 enroll.
- **Group Universal Life Insurance (DSWA Employees Only):** Securian Financial will send a confirmation enrollment letter.

Please Note: New Member ID Cards will be mailed mid to late June 2021.



Q: What will happen to my unused Aetna CDH Gold HRA funds at the end of the plan year?

For members who remain enrolled in the CDH Gold Plan, Health Reimbursement Account (HRA) funds will rollover to the next plan year and are available at the beginning of the new plan year.

If you do not continue enrollment in a CDH Gold Plan the funds will be forfeited. However, remaining unused funds will be used to pay for claims incurred during the period the employee was active in the CDH Gold Plan.

HRA Fund balances and status of claims may be obtained by contacting Aetna Customer Service at 1-877-542-3862 or **Aetna.com**.

Q: What do I need to provide if I am covering a spouse or other dependent for the FIRST TIME?

Proof of eligibility must be provided for anyone covering a spouse or dependent for the FIRST TIME.

- Proof of eligibility for a spouse is a copy of the Marriage Certificate/Civil Union Certificate.*
- Proof of eligibility for a dependent is a Birth Certificate or other legal document.*
- Social Security Card must be provided in order to confirm a spouse or dependent's Social Security Number.*
- Complete a **Dependent Child Coordination of Benefits** form if your dependent child has other health coverage.
- Complete a Certification of Tax Dependent Status form if covering a spouse due to civil union or other dependents due
 to civil union.*

Please contact your organization's Human Resources/Benefits Office to obtain information on how required supporting documentation should be submitted and with any questions.



^{*}This information is not forwarded to the carriers. Your Human Resources/Benefits Office will maintain this documentation.

Q: What do I need to do if I choose to cover my spouse for the 2021 Open Enrollment?

Review the Spousal Coordination of Benefits (SCOB) Policy and Chart before enrolling a spouse in health insurance coverage provided by the State of Delaware. You can access these documents on the SBO website by selecting your group and clicking "Spouse and Dependents."

Employees who cover their spouse on their State of Delaware Health Plan are required to complete a new SCOB Form <u>online</u> each year during Open Enrollment. *Note:* Only complete the online SCOB Form if you will be covering your spouse under a Highmark Delaware or Aetna Health Plan as of July 1, 2021.

Failure to submit a new form each year will result in a reduction of spousal health benefits.

Q: Where can I find information to assist with my electronic SCOB Form?

The *Spousal Coordination of Benefits Form Self-Service Guide* offers step-by-step instructions for completing the SCOB Form online during Open Enrollment and year-round.



Q: What's new for 2021 Open Enrollment?

There are a few changes for this year's Open Enrollment:

- CVS Caremark will be the new pharmacy benefit manager effective July 1, 2021. Enrollment with CVS Caremark is automatic with your enrollment in a State of Delaware health plan. Retail pharmacy options will not be restricted to CVS pharmacies. Walgreens, Rite Aid, CVS, Walmart, Target, and others will still be available. Formulary, or covered drug, changes are expected to be minimal. CVS Caremark will reach out to members directly in advance of the transition to provide notification of any pharmacy or prescription changes and suggested alternatives. CVS Caremark will work closely with Express Scripts to transition home delivery of automatic refills. You can expect to receive your new prescription card in late June, and you should show the new card at your first pharmacy visit on or after July 1, 2021.
- Certain participating groups will offer a vision plan through the State of Delaware. EyeMed, the vision plan provider, will offer two vision plan options for this year's Open Enrollment. You can select between a High Plan and a Low Plan. The High Plan has higher premiums (the amount taken out of your paycheck), but the out-of-pocket cost for certain services is lower. The Low Plan has lower premiums, but the out-of-pocket cost for certain services is higher. Both plans provide the same network of participating providers and members have the flexibility to use in-network or out-of-network providers. However, choosing in-network providers will give members the best value.

We would also like to remind you about some benefits that are available to you:

- Individuals enrolled in a State of Delaware non-Medicare health plan are automatically enrolled in a free benefit called SurgeryPlus. SurgeryPlus provides an alternative to using your health plan for a planned surgical procedure that is not an emergency. It requires doctors and facilities to meet strict credential guidelines leading to the highest quality care possible. SurgeryPlus negotiates a single cost (bundled rate) for the entire surgical procedure, resulting in savings to the State of Delaware. These savings are shared with you through financial incentives. As a result, members will not have to pay a copay, deductible or coinsurance for any services through SurgeryPlus. In addition, it comes with a concierge service (Care Advocate) to help plan your surgery and travel benefits if necessary.
- ComPsych® GuidanceResources® became the State of Delaware Employee Assistance Program (EAP) provider on January 1, 2021.

 Members enrolled in a State of Delaware non-Medicare health plan have 24/7 access to the benefits offered by GuidanceResources®.

 This includes confidential emotional support, online resources, interactive digital tools related to behavioral health and wellness, worklife solutions, legal guidance, financial resources, and identity theft solutions.

Learn more about these changes and reminders by visiting the **SBO** website (select "Open Enrollment").

